

CLAIMS ONLY							Application Number		Filing Date	
							Applicant(s) <i>10/026961</i>			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/						51			
2		/					52			
3		/					53			
4		/					54			
5		/					55			
6	/						56			
7		/					57			
8		/					58			
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42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep	5						Total Indep			
Total Depend	17						Total Depend			
Total Claims	22						Total Claims			